

FEE TRANSMITTAL

Application Number 10/680,723

Art Unit 1624

Filing Date October 7, 2003

Confirmation No. 2648

Inventors Michael S. South et al.

Examiner Name V. Balasubramanian

Attorney Docket Number PHA 4159.33 (3203/1B/US)



[] Applicant claims small entity status.

METHOD OF PAYMENT

- [] The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.
- [X] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. [] BASIC FILING, SEARCH AND EXAMINATION FEES
(Type: _____) Subtotal (1) \$_____

2. [] EXCESS CLAIM FEES

Total Claims ____ - ____ (HP) = ____ x Fee ____ = \$_____
Indep Claims ____ - ____ (HP) = ____ x Fee ____ = \$_____
Multiple Dependent Claims Fee _____
(HP = highest number of claims paid for)
Subtotal (2) \$_____

3. [] APPLICATION SIZE FEE

Total Pages ____ - 100 = ____ ÷ 50 = ____ x \$250 = \$_____
(Application + Drawings)
(round up to whole #)
Subtotal (3) \$_____

4. [X] OTHER FEE(S)

- [] _____ month extension of time
[] Information disclosure statement
[] 37 CFR 1.17(q) processing fee
[] Non-English specification
[] Notice of Appeal
[] Filing a brief in support of appeal
[] Request for oral hearing
[X] Other: Terminal Disclaimer

Subtotal (4) \$130.00

TOTAL AMOUNT OF PAYMENT \$130.00

Bradley S. Schammel
Bradley S. Schammel, Reg. No. 54,667
Telephone: 314-231-5400

3/1/05

Date

BSS/vlm
Express Mail Label No. EV 453253121 US